

# **SCHEDULE A-P** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Marco Rubio for President**

**A. Full Name (Last, First, Middle Initial)**

**MRS. JOHN ROBERTS**

Mailing Address 1000 WILLIAMS WAY

City	State	Zip Code
OLD HICKORY	TN	37138-1961

FEC ID number of contributing federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

370.00

**Transaction ID : SA17.930829**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

75.00

**B. Full Name (Last, First, Middle Initial)**

**MR. JOHN C. ROBERTS**

Mailing Address 7991 PASEO ESMERADO

City	State	Zip Code
CARLSBAD	CA	92009-8935

FEC ID number of contributing federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

**Transaction ID : SA17.898569**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

1500.00

**C. Full Name (Last, First, Middle Initial)**

**MRS. KELLY ROBERTS**

Mailing Address 4100 NEWPORT PLACE DR.

City	State	Zip Code
NEWPORT BEACH	CA	92660-2423

FEC ID number of contributing federal political committee.

C

Name of Employer  
HISTORIC MISSION INN CORPORATION

Occupation  
COO

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

**Transaction ID : SA17.898780**

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**Subtotal Of Receipts This Page (optional)**.....

4275.00

**Total This Period (last page this line number only)**.....